

**Sickle Cell Disease  
Public Health Strategic Planning Meeting  
October 13, 2014**

**Medication Compliance (Immunizations, treatments, and screenings)**

**{Identify up to 3 priority goals and strategies to address this issue}**

1. Define the problem.
2. Identify barriers and solutions to addressing the problem.
3. Identify best practices or existing models. If a model or best practice doesn't exist for sickle cell disease, does it exist for another disease? Describe.
4. Prioritize the issues you identified in order of importance and feasibility. How could the health department implement your strategy and who would do it?
5. (Physicians) Is it ever difficult to get certain medications approved for SCD? If so, what types of medications? Describe solutions for making the authorization process less involved? Is this a possibility? What would need to happen?
6. What do you know about pain contracts? In your experience have these been effective in improving patient compliance? Does your clinic utilize physician/patient pain contracts? Why is this necessary?
7. Are there instances when Medicaid will not cover medications for patients, such as hydroxyurea or exjade? If so, why are they not covered?
8. How do you think we can limit narcotic addiction in patients with SCD?
9. (Physicians) How often do you discuss hydroxyurea therapy with your patients? Are they usually receptive? If not, why?
10. Is it necessary to take prophylactic penicillin from 4 months of age to 5 years, if a child receives the pneumococcal vaccine? Why or why not?